Departmental Instruction 201(RTS)03 Reporting and Investigating Abuse and Neglect of Individuals Receiving Services in Department Facilities

201 - 1 Background

The Department of Behavioral Health and Developmental Services ("Department") has a duty to provide a safe and secure environment to individuals receiving services and has a philosophy of zero tolerance for abuse and neglect. The Department will, in all instances, investigate and act upon allegations of abuse or neglect. Therefore, whenever an allegation of abuse or neglect is made, the Department shall take immediate steps to protect the safety and welfare of individuals who are the victims of the alleged abuse or neglect, conduct a thorough investigation pursuant to central office direction, and take any action necessary to prevent future occurrences of abuse and neglect.

201 - 2 Purpose

The purpose of this Departmental Instruction (DI) is to establish policies, procedures, and responsibilities for reporting, responding to, and investigating allegations of abuse and neglect of individuals receiving services in Department facilities.

201 - 3 Definitions

Abuse Code of Virginia §37.2-100 This means any act or failure to act by an employee or other person responsible for the care of an individual in a Department facility that was performed or was failed to be performed knowingly, recklessly or intentionally, and that caused or might have caused physical or psychological harm, injury or death to a person receiving care or treatment for mental illness, mental retardation or substance abuse. Examples of abuse include, but are not limited to, acts such as:

- Rape, sexual assault, or other criminal sexual behavior,
- Assault or battery;
- Use of language that demeans, threatens, intimidates or humiliates the person;
- Misuse or misappropriation of the person's assets, goods or property;
- Use of excessive force when placing a person in physical or mechanical restraint:
- Use of physical or mechanical restraints on a person that is not in compliance with federal and state laws, regulations, and policies, professionally accepted standards of practice or the person's individualized services plan; and
- Use of restrictive or intensive services or denial of services to punish the person or that is not consistent with his individualized services plan.

Facility
Investigator
("Investigator")

This means a person who has successfully completed investigative training and has received a certificate of completion by the Department.

Neglect Code of Virginia §37.2-100

This means the failure by a person, program, or facility operated, licensed, or funded by the department, responsible for providing services to do so, including nourishment, treatment, care, goods, or services necessary to the health, safety, or welfare of a person receiving care or treatment for mental illness, mental retardation, or substance abuse.

Open investigation

This means an investigation that is begun when the facility director assigns an Investigator to it, and remains open until the facility director either determines the investigation is complete or, for investigations referred to the Investigations Manager, receives a letter from the Investigations Manager indicating that the investigation is complete.

of evidence

Preponderance This means the facts gathered show it is more probable than not that abuse or neglect occurred; evidence that is more convincing than the opposing evidence.

Workforce

This means Department classified employees, wage employees, contract employees (including locum tenens), temporary employees; volunteers, student interns; and consultants.

201 - 4 **Responsible Authorities**

Central Office

The **Investigations Manager**, or designee, is responsible for:

- Interpreting this DI in consultation with the Assistant Commissioner for Public Relations and Quality Improvement and the Office of Human Rights, as appropriate;
- Supervising Investigators in the context of investigations pursuant to this DI;
- Assisting in the process for hiring and/or selecting Investigators and providing input into Investigators' annual performance reviews:
- Providing training, consultation and supervision to Investigators during the investigation process as needed; and
- Reviewing and making determinations for investigations referred from the facility director.

Central Office (Continued) The Assistant Commissioner for Public Relations and Quality Improvement is responsible for:

- Supervising the Investigations Manager;
- Consulting with facility staff, the Investigations Manager, the Office of Human Rights, and others in implementing this DI;
- Assisting in the identification of situations or incidents which would require an investigation; and;
- Granting or denying requests for extensions to the investigation time frames in this DI.

The Investigations Manager and Assistant Commissioner for Public Relations and Quality Improvement are both responsible for identifying opportunities for system-wide learning from facility-based reviews and developing plans for dissemination of best practices as well as educational updates related to high risk areas.

The **Director of the Office of Human Rights** is responsible for oversight of the Human Rights Advocate in the course of an investigation and serves as a member of the Central Office Abuse/Neglect Review Panel.

Human Rights Advocates ("Advocates"), under the supervision of the Director of the Office of Human Rights, are responsible for:

- Ensuring that the rights of individuals receiving services are protected and represented from the time of the original notification of potential abuse or neglect throughout the course of the subsequent investigation; and
- Submitting the results of any independent investigation conducted in accordance with the Rules and Regulations to Assure the Rights of Individuals Receiving Services from Providers Licensed, Funded or Operated by the Department of Behavioral Health and Developmental Services, 12 VAC 35-115- 10 et seq. ("Human Rights Regulations") to the Director of the Office of Human Rights, the facility director, and the Investigations Manager.

The Central Office Abuse/Neglect Review Panel ("Review Panel") is responsible for reviewing all investigations that are outside the scope or expertise of the Investigations Manager related to standards of care, are considered controversial and subject to media coverage, may create significant risk for the Department and for general consultation. The Review Panel is responsible for reviewing and making recommendations regarding any investigation sent to the Central Office when the Investigation Manager intends to issue a final

(continued)

Central Office determination that is different from the determination of the Investigator. The Review Panel shall be comprised of the Directors of the Offices of Human Rights. Risk and Liability Affairs, and Quality Management and ad hoc members, when necessary.

Facilities

Facility directors, or their designee(s), are responsible for the implementation of this instruction within the facility including the following:

- Ensuring that each workforce member:
 - 1. Is given a copy of this DI;
 - 2. Reviews this DI at the time of orientation and annually thereafter; and
 - 3. Signs a statement acknowledging understanding of and agreement to abide by this DI.

Signed statements shall be maintained in either official personnel files or training records for employees or official training records for volunteers, contractors, contract employees, student interns, and consultants.

- Ensuring that the safety and welfare of individuals receiving services who may be associated with or involved in the review of potential abuse or neglect;
- Ensuring that the facility complies with all state laws that govern reporting abuse and neglect;
- Ensuring that the employee against whom an allegation is made is presumed not to have committed abuse or neglect unless the facts of the investigation show otherwise; and
- Ensuring the employee is advised of the investigation process and knows he may contact the Office of Human Resources or the facility director if he has questions.

Investigators

Investigators shall:

- Be appointed by the facility director:
- Conduct an impartial investigation:
- Render a decision pursuant to applicable time frames; and
- Be supervised by the Investigations Manager during the course of an active investigation.

201 - 5 Specific Guidance

Scope of this DI

This DI applies to all Department workforce members.

Rights of individuals

Each individual receiving services in a state facility has the right to:

- Be protected from harm including abuse, neglect, and exploitation (See §37.2-400 12VAC35-115-50 (B) (2) and (D) (3);
- Report any potential abuse or neglect that happened to him or another individual receiving services without reprisal; and;
- Have all allegations of abuse or neglect investigated in accordance with the time frames in the Human Rights Regulations and this DI.

Policy regarding allegations

All occurrences or events that may involve abuse or neglect of individuals in facilities and any information regarding such shall be reported directly to the facility director, or his designee, as appropriate, so that immediate action may be taken to safeguard individuals receiving services.

Workforce protections

When an allegation of abuse/neglect has been reported, the identified workforce member shall:

- Be informed that an allegation of abuse or neglect has been made, the nature
 of the allegation, and that an impartial investigation will be conducted in a
 timely and thorough manner;
- Be explained his rights under this policy;
- Be informed of the time frames for completion of the investigation;
- Be notified of the findings of the investigation;
- Have the opportunity to present information on his own behalf to the Investigator; and
- Have the opportunity to present information on his own behalf to the person responsible for taking disciplinary action and at any related administrative hearings.

Workforce protections (Continued)

At the time of the allegation stage, the identified workforce member is presumed to not have committed abuse/neglect.

Substantiating abuse and neglect

A finding of abuse or neglect shall be substantiated by a preponderance of the evidence. The standard for substantiating abuse and neglect will be based on preponderance of the evidence gathered during the investigation process. See "preponderance of the evidence" in the definitions section.

Independent investigations

In accordance with the Human Rights Regulations, an advocate may conduct an independent investigation of an allegation of abuse and/or neglect. Results of such independent investigations shall be submitted to the Director of the Office of Human Rights, the facility director, and the Investigations Manager.

In accordance with DI 401(RM) 03, *Risk and Liability Management*, facility risk managers are responsible for conducting investigations of injuries or other events that may also involve abuse or neglect.

Neither of these types of investigations negates the need to also do an investigation pursuant to this DI.

Release of information

All requests for information received by any member of the workforce regarding abuse or neglect investigations shall be routed through the facility director.

Privacy

The Department's workforce in the central office and state facilities shall take collective responsibility for appropriately securing, retaining, and sharing protected health information about all individuals entrusted to the Department's system of care, consistent with the Department's privacy policies and procedures (see DI 1001(PHI)03, *Privacy Policies and Procedures for the Use and Disclosure of Protected Health Information*).

Personnel actions

All personnel actions, including grievance resolutions that result from abuse or neglect investigations, shall be reported to the Department's assigned Human Resource Consultant.

201 - 6 Procedures - Reporting

Reporting abuse and neglect

Any workforce member who has any knowledge or reason to believe that an individual residing in a state facility may have been abused or neglected, or both, shall immediately report this information directly to the facility director, or designee, as appropriate.

Knowledge or reason to believe abuse or neglect has occurred may be based on, but not limited to, the following:

- Direct observation, including clinical determinations;
- A statement made by an individual receiving services;
- A statement from another workforce member.

When reporting to the facility director, the workforce member shall describe the incident as fully as possible, giving the names of any persons involved, the time, date, and location of the incident, and the names of any witnesses.

The facility director shall be notified in all cases. However, workforce members may and shall when required by law, also directly notify any of the following of the possible abuse or neglect at the same time as they notify the facility director:

- Office of the Inspector General;
- Central Office Investigations Manager;
- Human Rights Advocate;
- Child or adult protective services unit in the local department of social services;
- Virginia Office for Protection and Advocacy (VOPA)

Workforce members' duties

After reporting an incident or allegation of possible abuse or neglect to the facility director, workforce members are expected to cooperate fully in the investigation process. This may include submitting written statements, if requested, to the Investigator assigned to conduct the investigation.

Workforce members shall:

• Report all incidents of suspected abuse or neglect of individuals receiving service in accordance with this DI;

Workforce members' duties

(Continued)

- Provide accurate and complete information regarding the alleged abuse or neglect;
- Provide accurate and complete information during interviews with the Investigator or in an administrative proceeding; and
- Protect the confidentiality of the investigation.

In addition, workforce members shall not:

- Discuss any aspect of the investigation, or share documents, statements, or evidence related to the investigation;
- Alter, remove, or destroy documents or evidence of any kind that is related to the investigation; or
- Conduct their own investigation by taking photographs, copying records, soliciting statements, or in any way attempting to supplant or supplement the activities of the assigned Investigator (this does not apply to the facility Risk Manager or Human Rights Advocate).

Any action by a workforce member that compromises the integrity or outcome of an investigation may be cause for disciplinary action.

Failure to report suspected abuse or neglect of children or aged or incapacitated adults may be subject to monetary penalties under §63.2-1509 and §63.2-1606 of the *Code of Virginia*.

201 - 7Procedures—Initial Investigation

Upon receipt

Upon receipt of an allegation of abuse or neglect, the facility director or designee of an allegation shall immediately:

- Ensure that appropriate and necessary steps are taken to protect the safety and welfare of the individual receiving services. Actions may include, but are not limited to, suspending or relocating any workforce member who is the subject of an investigation; and
- Ensure that any physical evidence is protected (e.g., have the individual examined, isolate and collect clothing, take pictures, secure the scene, etc.);

Upon receipt (Continued)

Following the receipt of an allegation of abuse or neglect the facility director shall of an allegation do the following within 24 hours:

- Initiate an impartial investigation conducted by an Investigator;
- Notify the individual and his AR, if applicable, that an investigation has been initiated and provide the opportunity to be kept informed of the investigation process;
- Notify the Human Rights Advocate that an investigation has been initiated:
- Notify the local department of social services, as required by §§ 63-2-1509 or 63.2-1606; and;
- Ensure that the allegation is entered into the Computerized Human Rights Information System (CHRIS).

As the investigation begins, the facility director shall ensure that workforce members are reminded to cooperate fully with the investigation and not discuss the facts of the alleged abuse or neglect with anyone other than the investigation staff.

The facility director shall also immediately contact local law enforcement or the State Police Bureau of Criminal Investigations, or both, in all cases of suspected criminal activity, e.g., Virginia Code § 18.2-369. If a law enforcement agency determines that a criminal investigation is warranted, any Department investigation of the allegation of abuse or neglect may be suspended if requested by the law enforcement agency investigator.

Specific to this DI, the facility director and the Investigator shall take immediate action, based on critical care issues of the individual receiving services, to determine whether there is a need to secure evidence or sequester clinical records while ensuring that appropriate treatment continues.

Conflict of Interest

If any workforce member is aware of a possible personal or professional relationship of the Investigator that could compromise the integrity of an investigation of abuse or neglect, the workforce member shall immediately notify the facility director and the Investigations Manager. If a conflict of interest does in fact exist, the Investigations Manager shall take appropriate action to resolve the conflict.

Role of the Advocate

During the investigation process the Advocate may represent the individual who is the victim of the alleged abuse or neglect. The Advocate may be present during the Investigator's interview of the individual when requested by:

- (i) the individual who is the victim of the alleged abuse or neglect or his AR; or
- (ii) the Investigator, with permission of the individual.

In addition, the Advocate may be present at his own discretion.

The Advocate shall monitor the investigation process including ensuring that the facility protects the individual's human rights throughout the investigation process and providing feedback to the Investigator regarding human rights issues. The Advocate shall provide the Investigator with all information that he possesses in regard to the allegation.

The Advocate's monitoring of the Department's investigation in no way signifies the Advocate's agreement with the findings of that investigation.

201 - 8 Procedures—Investigation Process

Improbable allegations

When the facility director, Investigator, and Advocate, in consultation and agreement, determine at any time during the course of an investigation that an individual's allegation of abuse or neglect may be based on inaccurate information and as such may be an improbable allegation, the following actions shall take place as part of the investigation process:

- The individual's treatment team shall be consulted.
- A thorough clinical assessment shall be conducted to ascertain if there is
 evidence that the event occurred or if the allegation of abuse or neglect is
 more likely than not to be symptomatic of the individual's illness or cognitive
 disability.
- If the clinical assessment determines that the event is more likely than not to be symptomatic of the individual's illness or cognitive disability then no further investigation need take place.
- The facility director shall maintain supporting documentation in all such cases. Such documentation shall include but not be limited to:

Improbable allegations (continued)

- A statement from the individual's treatment team, to the facility director indicating why the allegation did not warrant further investigation; and what, if any, treatment interventions are being implemented to address this aspect of the individual's behavior; and
- Entry of the findings into CHRIS.
- If the facility director, Investigator, or Advocate believe at any time that the case warrants further investigation, the case shall proceed through the regular investigative process.

When it is determined that there is no reason to suspect that the abuse or neglect has occurred, the Investigator shall notify the Investigations Manager, facility director and Advocate by formal letter, outlining the factors that led to this conclusion. The facility director shall then close the investigation as unsubstantiated and will follow the closure procedures in section 201-9.

completion

Timeframe for The Investigator assigned to a case shall ensure completion of the investigation report within the following prescribed timeframes.

- 5 working days of assignment of a case for all allegations that must be reported to the Department of Health (for Medicaid or Medicare certified facilities) or when an employee has been suspended.
- 10 working days of assignment of a case for all other allegations unless the Commissioner or any regulation requires a shorter timeframe.

Extensions

The Assistant Commissioner for Public Relations and Quality Improvement may grant an extension for the completion of any investigation; except those that must be reported to the Department of Health.

Any request to extend the 10 working day investigation timeframe shall be submitted to the Assistant Commissioner for Public Relations and Quality Improvement within six working days of assignment of the case to an Investigator and may be approved when documented circumstances justify the extension.

Copies of any approved extension request shall be forwarded to the facility director and the Advocate.

Investigation conclusion

At the conclusion of the investigation the Investigator shall:

- Submit a signed and dated investigations summary report and, if there is no disagreement, a transmittal letter with all documentary evidence and a determination of whether abuse and/or neglect occurred to the facility director and the Advocate.
- Brief the facility director and the Advocate in order to provide additional information or comments and obtain feedback regarding his preliminary determination.

If either the facility director or the Advocate has concerns regarding or disagrees with the Investigator's findings or the investigation process, those concerns shall be communicated directly to the Investigations Manager. The Investigator shall immediately forward the investigation file to the Investigations Manager for review.

Investigation determination

For investigations that do not require additional review or consultation by the Investigations Manager, the facility director shall implement any actions required to address any findings or recommendations and proceed to close the investigations in accordance with procedures in section 201-9.

Upon receipt of the transmittal letter, in all cases, the facility director shall provide his written decision, including actions taken as a result of the investigation, within seven working days to the individual or his AR, the Advocate, any investigation authority, the Deputy Commissioner, and the involved workforce member or members.

This decision shall be in writing and in the manner, format, and language that is most easily understood by the individual.

For investigations submitted for additional review, the Investigations Manager shall review the Investigator's determination and all relevant evidence collected and shall make a final determination based on the preponderance of the evidence.

The Investigations Manager shall make this determination within the following timeframes:

- 5 working days of receipt of the investigation when an employee has not been suspended; or
- <u>2 working days of receipt of the investigation</u> involving suspension of an employee.

Investigation determination (continued)

Upon completion of this review, the Investigations Manager shall forward a transmittal letter to the facility director with the final determination of the investigation, describing any administrative issues that need to be addressed. The investigation then shall be closed in accordance with section 201-9.

When the Investigations Manager, following a complete review, intends to issue a final determination that is different from the determination of the Investigator, the Investigations Manager shall forward the investigation file to the Central Office Abuse/Neglect Review Panel for recommendations within 48 hours.

The Review Panel shall consult with practicing clinicians who are topic area experts, as needed, but shall do so for all investigations where there is a question of clinical judgment or clinical practice directly related to a potential finding of abuse or neglect. The Review Panel shall make recommendations to the Investigations Manager regarding the final determination of the investigation within 48 hours.

The Investigations Manager shall render a final decision via transmittal letter to the facility director.

review

Medical/clinical All investigations referred to the Investigations Manager that involve medical practice or clinical standard of care issues shall include consultation with a Department clinical services practitioner designated by the Commissioner.

201 - 9Procedures—Closure

Final actions

When the investigation is closed, the **facility director** or his/her designee shall:

- Confirm the final disposition of the investigation by signing the written inhouse transmittal letter submitted by the Investigator or the transmittal letter from the Investigation Manager.
- Provide written notification of the results of the investigation, the determination, and action taken within seven working days of completion of the investigation to the following:
 - the individual receiving services;
 - his AR, if applicable;
 - the Advocate; and
 - o workforce members named in the investigation.

Final actions (Continued)

- Take appropriate corrective actions as outlined in the Department's Employee Handbook, Chapter 14, in accordance with the findings of the investigation. This may include requesting mitigation through the assigned Human Resource Consultant.
- When an allegation is determined to be unfounded, the facility director and/or Investigator shall provide the employee the opportunity to discuss the investigations process and outcomes of the investigation;
- Implement and track any appropriate administrative or clinical care and treatment-related actions in order to prevent future occurrences of abuse or neglect. Such actions shall be developed in consultation with the Advocate and other appropriate personnel;
- Notify the local Department of Social Services, regulatory agencies, and others, as required;
- Ensure that all required information about the investigation is entered into the CHRIS; and
- Notify the Department of Health Professions or professional licensing authority as required by Virginia Code §54.1-2400.6.

201 - 10 References

- §§ 63.2-1509 and 63.2-1606 of the *Code of Virginia*
- §37.2-100 of the *Code of Virginia*
- §37.2-400 of the Code of Virginia
- §54.1-2400.6 of the *Code of Virginia*
- DHRM policy 1.60 Employee Standards of Conduct and Performance
- DBHDS Employee Handbook: Chapter 14
- Rules and Regulations to Assure the Rights of Individuals Receiving Services from Providers Licensed, Funded or Operated by the Department of Mental Health, Mental Retardation and Substance Abuse Services, 12 VAC 35-115
- Abuse/Neglect Investigations Policy and Procedures Manual

- Departmental Instruction 1001(PHI) 03, Privacy Policies and Procedures for State Facility and Central Office Use, Disclosure, and Protection of Individually Identifiable Health Information.
- Departmental Instruction 401(RM) 03, Risk and Liability Management.

James S. Reinhard, M. D.

Commissioner

Effective Date: August 31, 2009

Attachment

Investigation Procedures

	Roles and Responsibilities			
Event/ Process	Facility Director	Investigator	Human Rights Advocate	Investigations Manager
Initial Allegation of Abuse or Neglect— Initial 24 hour Investigation	Take steps to protect safety and welfare of the individual. Protect physical evidence. Assign a facility investigator. Notify the human rights advocate and if applicable, the individual's legally authorized representative. Ensure allegation is entered into CHRIS system. Report suspected criminal activity to local lawenforcement and State Bureau of Criminal Investigations and notify department of social services, where appropriate. Consult with investigator and Investigation Manager to determine whether it is necessary to sequester records. In conjunction with Investigator and facility advocate, determine whether the case requires further investigation.	Open an investigation. Consult with facility director and human rights advocate for help in determining whether there is a basis to suspect abuse or neglect Attempt to resolve improbable complaints of abuse or neglect by consulting with the facility director, facility advocate and the individual's treatment team. Determine whether there is a basis to proceed with the abuse or neglect investigation or whether the complaint appears improbable. Maintain locked confidential files.	Assist with the investigation, when requested, by consulting with the facility director, the investigator, Investigation Manager, and the individual who is the victim of the alleged abuse or neglect. Consult with the facility director and investigator to determine whether the case warrants further investigation. Be present during any interview of the individual receiving services. Monitor investigative process and procedures.	Provide direction and consultation to the investigator in the investigation process. Maintain locked confidential files.
Initial Investigation Finds No Basis for Abuse or Neglect. Complaint Improbable	Maintain documentation to Support determination and terminate the investigation (see Final Actions). Request that the facility advocate meet with the individual who is the subject of the complaint.	Notify the facility director and advocate by formal letter outlining factors that led to conclusion. Close investigation case file as unsubstantiated.	Meet with the alleged victim of abuse or neglect	Provide guidance, supervision and assistance to facility investigators

	Roles and Responsibilities				
Event/ Process	Facility Director	Investigator	Human Rights Advocate	Investigations Manager	
Reason to Suspect Abuse/Neglect	Notify the Department of Health Professions, or other professional licensing authority, as appropriate Notify the patient or resident's legally authorized representative and appropriate family members (with permission) of the status of the investigation. Notify the workforce member and his supervisor when the workforce member is suspected of the alleged abuse or neglect, and take appropriate action pursuant to the Employee Standards of Conduct and Department policy	Complete the investigation within the required timeframes Within 5 working days for cases that are reported to the Department of Health or when an employee has been suspended Within 10 working days for all other cases unless shorter timeframes are required by any regulation or the Commissioner An extension may be requested and authorized by the Assistant Commissioner for Public Relations and Quality Improvement if requested within 6 working days of assignment of investigator	Represent the individual receiving services. Be present during the investigator's interview of the person receiving service. Provide any relevant information to the investigator.	Provide guidance and, supervision, to facility investigator. Ensure that investigations are conducted according to this DI.	
Conclusion of Investigation	May consult with Investigations Manager to provide further clarification or express concerns regarding the investigators findings, if necessary, via email or in writing	Submit a summary report of findings, documentary evidence and preliminary determination with signature and date. Forward a copy of the summary report to the facility director and human rights advocate. Brief the facility director and facility advocate regarding case findings. If there is no consensus regarding the investigative finding, the case is forwarded by the investigator to the Investigation Manager for resolution.	May consult with the Investigations Manager to express concerns or provide further clarification of investigator's findings, if necessary.	Provide guidance and assistance to facility investigator. Review cases where investigator, advocate and facility director can not reach a consensus. When the Investigation Manager intends to issue a determination that is contrary to that of the facility investigator, the case will be forwarded to the CO Abuse/Neglect Review Panel. The Review Panel will make recommendations regarding the final determination within 48 hours	

		esponsibilities		
Event/ Process	Facility Director	Investigator	Human Rights Advocate	Investigations Manager
Final Actions	When investigation concludes regardless of outcome, provide results within seven days, to the individual receiving services, his LAR, human rights advocate and any employee or other workforce member who was subject to investigation.	Respond to any follow-up inquiries from the Investigation Manager.	Discuss the investigation findings and final action of facility director with the individual receiving services and advise of his right to pursue the matter through the human rights process.	Upon completion of review, forward transmittal letter, including any requests for corrective action to facility director.
	Notify local department of social services, regulatory agencies and others when required.			
	Take any appropriate disciplinary actions as outlined in the Employee Standards of Conduct and Performance.		·	
	Ensure data is entered into CHRIS.			
	Provide a written decision, including actions taken as a result of the investigation within 7 working days, following completion of the investigation to the individual or the individual's authorized representative, the human right's advocate, Deputy Commissioner and the involved workforce member or members.			